

Best Available Copy

<b>CLAIMS ONLY</b>						SERIAL NO.		FILING DATE		
						APPLICANT(S)				
<b>CLAIMS</b>										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
1	/					51				
2	/					52				
3						53				
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44						94				
45						95				
46						96				
47						97				
48						98				
49						99				
50						100				
TOTAL IND.	3					TOTAL IND.				
TOTAL DEP.	15					TOTAL DEP.				
TOTAL CLAIMS	18					TOTAL CLAIMS				

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS